

# QUESTIONS AND ANSWERS ABOUT MRSA

## *For Corrections Professionals*

### What is MRSA?

MRSA stands for “methicillin-resistant *Staphylococcus aureus*.” MRSA is a kind of *Staphylococcus aureus* (“staph”) bacteria that is resistant to some antibiotics.

Many people think that MRSA is a “super bug” capable of causing unusually severe disease. However, many staph, including MRSA, can sometimes cause severe disease. The difference is that MRSA needs to be specifically identified and treated with different medication. With proper treatment, MRSA can be treated successfully.

### What are the symptoms of a staph/MRSA infection?

Pimples, rashes, pus-filled boils, especially when warm, painful, red or swollen, can mean that a person has a staph or MRSA skin infection. The only way to tell the difference between MRSA and other staph infections is with lab tests. Occasionally, staph, including MRSA, can also cause more serious problems such as surgical wound infections, bloodstream infections and pneumonia. The symptoms could include high fever, swelling, heat and pain around a wound, headache and fatigue.

### How is MRSA diagnosed?

A healthcare professional will take a sample on a swab (like a Q-tip) from the infected area. The sample will be sent to a laboratory to see if the infection is caused by staph. If the infection is caused by staph, a second test will be needed to determine if the staph is MRSA. Blood and other body fluids can also be tested for staph.

### How are MRSA infections treated?

Most MRSA infections are treated by good wound and skin care: keeping the area clean and dry, washing hands after caring for the area, carefully disposing of any bandages and allowing the body to heal. Sometimes treatment requires the use of antibiotics. If antibiotics are needed, it is important to use the medication as directed unless a doctor says to stop. If the infection has not improved within a few days after seeing a doctor, it is important to contact the doctor again.

### Is MRSA a problem in correctional facilities?

Not necessarily in all facilities. Many people, including inmates and corrections officers, carry staph (including MRSA) in their nose or on their skin and do not know they are carrying it. They do not get skin infections. They do not have any signs or symptoms of illness.

However, there are some conditions that can lead to MRSA/staph infections in prisons and jails (see below), and in other settings where people have a lot of direct contact and skin abrasions can occur, like sports teams.

### What kinds of conditions can lead to a MRSA/staph infection in correctional settings?

1. **Direct contact:** To get a MRSA or other staph infection, you must get bacteria on your skin or in your nose. Staph, including MRSA, are spread by direct skin-to-skin contact. In correctional facilities, this can occur when one person shakes hands with another, tackles or wrestles with another person, gets “patted down,” or has some other direct contact with the skin of another person. This happens in any situation where there is direct contact, not just in jails or prisons.

Staph are also spread by contact with items that have been used by people with staph on their skin, like towels, or athletic equipment shared in the gym.

2. **Lack of handwashing:** The best way to prevent skin infections, and many other infections, is to wash hands frequently. MRSA and other staph can be removed from the hands by washing with soap and water or by using a hand sanitizer.

3. **Cuts and scrapes:** MRSA and other staph need to get into the skin before an infection occurs, often through a scrape, scratch, or wound. MRSA can also enter the body when non-sterile equipment is used in body piercing and tattooing.
4. **Dealing with infections:** People with MRSA and other staph skin infections – especially boils or wounds that are swollen and have pus – can most easily spread staph to others. Skin infections should be taken seriously and treated appropriately (see below).

## What about family and friends outside the prison or jail?

It is normal to be concerned about spreading MRSA and other staph to family and friends outside the jail or prison. However, your family and friends do not have a greater chance of getting MRSA or other staph infections from you just because you work in a correctional facility. There are many ways to reduce the risk of spreading MRSA and other staph, starting with frequent handwashing. See additional prevention steps below.

Keep in mind that many people, inside and outside correctional facilities, carry staph on their skin and do not have an infection. These people are “colonized” with staph. In some places, such as hospitals and nursing homes, MRSA and other staph infections are relatively common. In other words, there are many ways that people are exposed to MRSA and other staph.

## How can MRSA be prevented and controlled in correctional facilities?

As with other infectious diseases, basic infection control practices should be followed.

- Practice good hand hygiene. Wash your hands and encourage inmates and their visitors to practice proper handwashing as well.
- Take care of your skin (avoid dry skin, cuts and scrapes, and keep cuts and scrapes clean and covered) and encourage inmates to do the same.
- Encourage inmates to take regular showers with soap and warm water.
- Do not share personal items such as towels, razors, and toothbrushes. Encourage inmates not to share personal items.
- Be observant. Encourage inmates with skin lesions to follow up with healthcare staff as soon as possible. See a doctor if you are concerned about a skin infection.
- Use appropriate personal protective equipment (PPE, for example, gloves) whenever you expect to have contact with an inmate’s blood or body fluids.
- Follow your agency’s infection control policy.

## Other means for reducing transmission:

- Launder sheets, towels, uniforms, and underclothing with hot water and detergent and dry on the hottest setting, or use a detergent which has the same effect.
- Wear gloves when handling dirty laundry.
- Regularly clean sinks, showers and toilets.
- Whenever possible, disinfect athletic equipment after each use.
- Use contact precautions (gown and gloves) for wound care.
- Cover draining wounds and damaged skin (sores, cuts, scratches and scrapes) with bandages.
- Carefully dispose of bandages containing pus or blood.
- Disinfect contaminated portable equipment, such as stethoscopes, blood-pressure cuffs, equipment handles, tourniquets, handcuffs, shackles, pagers, and cell phones.

MRSA can survive on objects and surfaces such as linen, sinks, floors, medical equipment, and all surfaces commonly touched by the hands of inmates, corrections officers, and healthcare staff. Appropriate application of surface disinfectants (see package labeling) is recommended for environmental cleaning when MRSA is a concern.

**For more information about MRSA, visit the MDPH website at [www.mass.gov/dph](http://www.mass.gov/dph)**

MRSA

